

<b>EPA</b> United States Environmental Protection Agency Washington, DC 20460 <b>Work Assignment</b>						Work Assignment Number 3-5				
						<input type="checkbox"/> Other <input checked="" type="checkbox"/> Amendment Number: 000001				
Contract Number EP-W-08-019			Contract Period 03/11/2008 To 03/10/2012			Title of Work Assignment/SF Site Name				
			Base                      Option Period Number    3			EGS Metrics & Indicators				
Contractor RESEARCH TRIANGLE INSTITUTE					Specify Section and paragraph of Contract SOW					
Purpose: <input type="checkbox"/> Work Assignment <input type="checkbox"/> Work Assignment Close-Out <input checked="" type="checkbox"/> Work Assignment Amendment <input type="checkbox"/> Incremental Funding <input type="checkbox"/> Work Plan Approval					Period of Performance  From 07/11/2011 To 03/10/2012					
Comments: The contractor shall prepare a revised work plan and cost estimate in accordance with the attached Statement of Work. Included with the amendment and revised Statement of Work, is a copy of the revised Statement of Work with changes made to the original Statement of Work highlighted.										
<input type="checkbox"/> Superfund                      Accounting and Appropriations Data <input checked="" type="checkbox"/> Non-Superfund										
Note: To report additional accounting and appropriations data use EPA Form 1900-69A.										
SFO (Max 2) <input type="checkbox"/>										
Line	DCN (Max 6)	Budget/FY (Max 4)	Appropriation Code (Max 6)	Budget Org/Code (Max 7)	Program Element (Max 9)	Object Class (Max 4)	Amount (Dollars)	(Cents)	Site/Project (Max 8)	Cost Org/Code (Max 7)
1										
2										
3										
4										
5										
Authorized Work Assignment Ceiling										
Contract Period:		Cost/Fee:				LOE: 576				
03/11/2008 To 03/10/2012										
This Action:						-13				
Total:						563				
Work Plan / Cost Estimate Approvals										
Contractor WP Dated:				Cost/Fee:		LOE:				
Cumulative Approved:				Cost/Fee:		LOE:				
Work Assignment Manager Name Paul Ringold						Branch/Mail Code:				
_____ (Signature)                      (Date)						Phone Number 541-754-4565				
						FAX Number:				
Project Officer Name Ryan Daniels						Branch/Mail Code:				
_____ (Signature)                      (Date)						Phone Number: 202-564-6476				
						FAX Number:				
Other Agency Official Name						Branch/Mail Code:				
_____ (Signature)                      (Date)						Phone Number:				
						FAX Number:				
Contracting Official Name Rachel Schwartz						Branch/Mail Code:				
_____ (Signature)                      (Date)						Phone Number: 202-564-1053				
						FAX Number: 202-565-2554				